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CONFIRMATION NO. 1847

<b>SERIAL NUMBER</b> 10/801,741	<b>FILING OR 371(c) DATE</b> 03/16/2004 <b>RULE</b>	<b>CLASS</b> 264	<b>GROUP ART UNIT</b> 1621	<b>ATTORNEY DOCKET NO.</b> P03074d1
<b>APPLICANTS</b> Jay F. Kunzler, Canandaigua, NY; Joseph C. Salamone, Fairport, NY; Dharmendra Jani, Fairport, NY; Erik M. Indra, Webster, NY;				
<b>CONTINUING DATA *****</b> <i>Yes</i> This application is a DIV of 10/165,834 06/07/2002 ABN which claims benefit of 60/366,696 03/21/2002				
<b>FOREIGN APPLICATIONS *****</b> <i>None</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 06/02/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>None</i> <i>CON</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 13
<b>INDEPENDENT CLAIMS</b> 2				
<b>ADDRESS</b> 23702				
<b>TITLE</b> Vitreoretinal silicone tamponades made by supercritical fluid extraction				
<b>FILING FEE RECEIVED</b> 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	